

ICD-10-CM: Training

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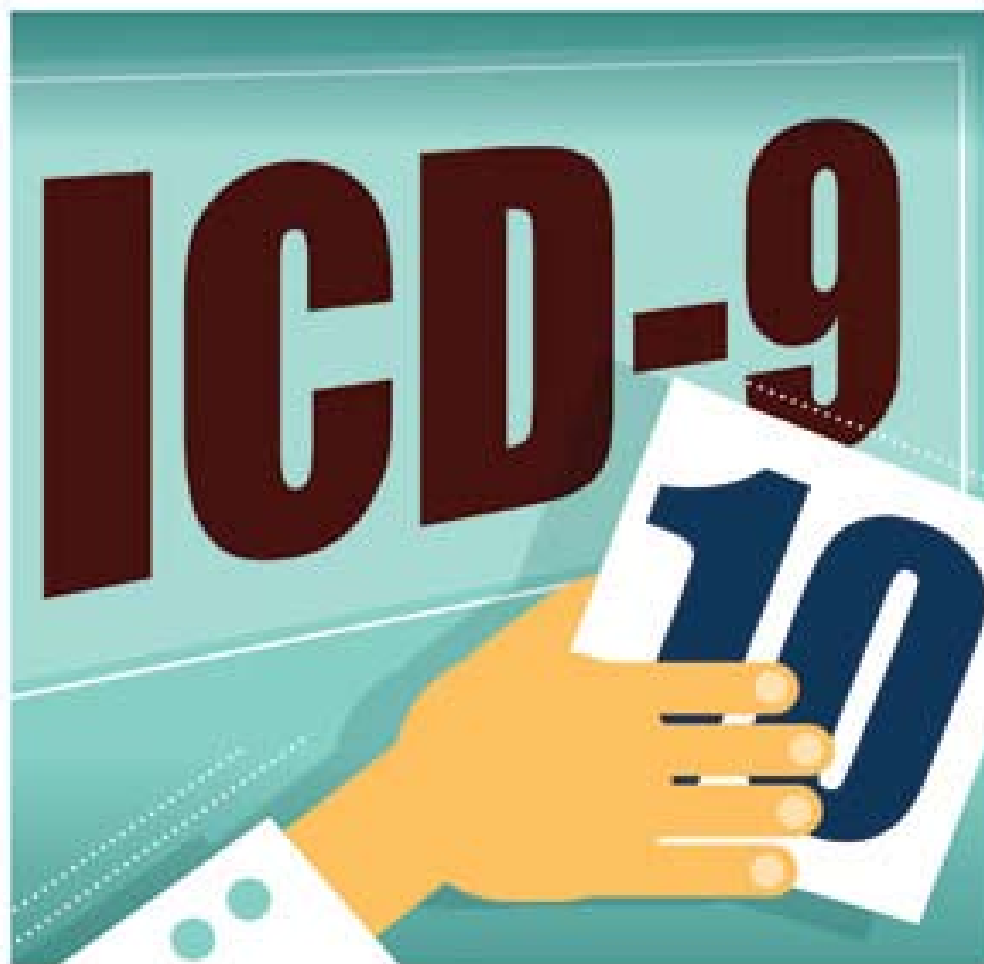
ICD10CM/PCS

AHIMA Approved Trainer

&

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Partial Freeze of Revisions to ICD-9-CM and ICD-10-CM/PCS CDC.gov

- ▶ October 1, 2011 is the last major update of ICD-9-CM. Any further revisions to ICD-9-CM will only be for a new disease and/or a procedure representing new technology. Revisions will be posted on this website as addenda (revisions to procedures are posted on the CMS website).
- ▶ After October 1, 2011 there will be no further release of ICD-9-CM on CD-ROM.
- ▶ October 1, 2011 is the last major update of ICD-10-CM/PCS until October 1, 2015.
- ▶ Between October 1, 2011 and October 1, 2015 revisions to ICD-10-CM/PCS will be for new diseases/new technology procedures, and any minor revisions to correct reported errors in these classifications.
- ▶ Regular (at least annual) updates to ICD-10-CM/PCS will resume on October 1, 2015.
- ▶ ICD-10-CM/PCS, on CD-ROM will be released one year prior to implementation.
- ▶ Note: The 2013 release of the ICD-10-CM is now available. It replaces the December 2011 release.
- ▶ ICD-10-CM 2013 Official Guidelines for Coding and Reporting are also available.

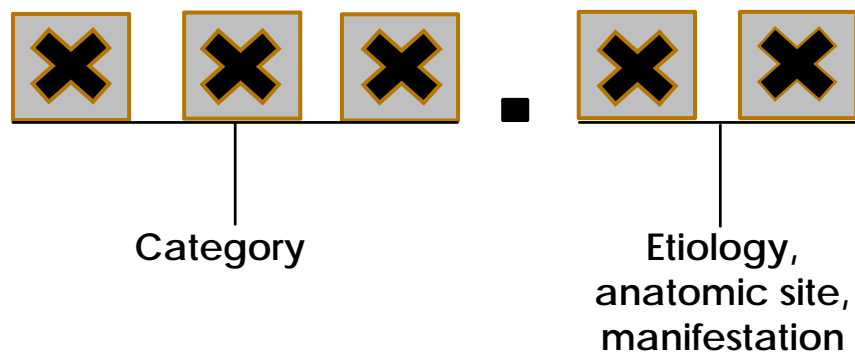
Structure and Format of ICD-10-CM

- ▶ Consists of three to seven **characters**
 - ▶ First **character** used is alpha
 - ▶ All letters used except U
 - ▶ **Character 2** always numeric
 - ▶ **Characters 3 through 7** can be alpha or numeric
 - ▶ Decimal placed after the first three **characters**
 - ▶ Alpha characters are not case-sensitive
- ▶ **1.A.4. Placeholder character**
 - ▶ The ICD-10-CM utilizes a placeholder character "x". The "x" is used as a placeholder at certain codes to allow for future expansion. An example of this is at the poisoning, adverse effect and under dosing codes, categories T36-T50.
 - ▶ **1.A.5. 7th Characters**
 - ▶ Certain ICD-10-CM categories have applicable 7th characters. The applicable 7th character is required for all codes within the category, or as the notes in the Tabular List instruct. The 7th character must always be the 7th character in the data field. If a code that requires a 7th character is not 6 characters, a placeholder X must be used to fill in the empty characters

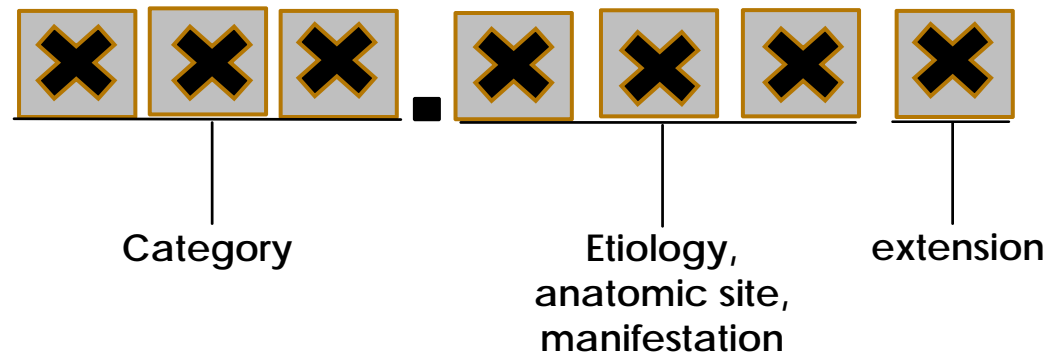
Code structure of ICD-10-CM versus ICD-9-CM

ICD-10-CM codes may consist of up to seven characters, with the seventh character representing visit encounter or sequelae for injuries and external causes.

ICD-9-CM Code Format



ICD-10-CM Code Format



MAPPING

- ▶ As a part of the conversion, two sets of diagnosis code General Equivalence Mappings (GEMS) have been developed. This mapping is a type of crosswalk to find corresponding diagnosis codes between the two code sets. The GEMs files are:
 - ▶ 1. I-9 to I-10, which is forward mapping
 - ▶ 2. I-10 to I-9 which is backward mapping

ICD-10-CM compared to ICD-9-CM

- ▶ Expanded detail for many conditions (e.g., viral hepatitis has been expanded from ICD-9 070, a single 3-digit category, to ICD-10 B15-B19, five 3-digit categories).
- ▶ Transferred conditions around the classification (e.g., hemorrhage has been moved from the circulatory chapter to the symptoms and signs chapter)

Excludes Notes

The ICD-10-CM has two types of excludes notes. Each type of note has a different definition for use but they are all similar in that they indicate that codes excluded from each other are independent of each other.

a. Excludes1

A type 1 Excludes note is a pure excludes note. It means "NOT CODED HERE!" An Excludes1 note indicates that the code excluded should never be used at the same time as the code above the Excludes1 note. An Excludes1 is used when two conditions cannot occur together, such as a congenital form versus an acquired form of the same condition.

b. Excludes2

A type 2 Excludes note represents "Not included here". An excludes 2 note indicates that the condition excluded is not part of the condition represented by the code, but a patient may have both conditions at the same time. When an Excludes 2 note appears under a code, it is acceptable to use both the code and the excluded code together, when appropriate.

Example: K83 Other diseases of biliary tract

EXCLUDES 1 - postcholecystectomy syndrome (K91.5)

EXCLUDES 2 - conditions involving the gallbladder (K81-K82)

conditions involving the cystic duct (K81-K82)

Improvements in The ICD-10-CM

Creation of combination diagnosis/symptom codes to reduce the number of codes needed to fully describe a condition:

I25.110 is the code for atherosclerotic heart disease of native coronary artery with unstable angina pectoris. Two codes are required to classify both diagnosis within the ICD9.

The incorporation of common fourth- and fifth-character subclassifications:

F10.14 is the five-character code to report alcohol abuse with alcohol-induced mood disorder.

Improvements, cont.

- Extensive expansion of the injury codes, allowing for greater specificity: S50.351 is the code for superficial foreign body of right elbow. The 7th character designates the encounter : A-initial encounter, D-subsequent encounter, S-sequela
- The addition of the sixth character: S06.336 is the code to report unspecified contusion and laceration of the cerebrum, with loss of consciousness greater than 24 hour without return to pre-existing conscious level with the patient surviving (requires a 7th character to describe the encounter (A, D, or S)

Improvements, cont.

- **Updating and greater specificity of Diabetes Mellitus codes:**
- DM codes have been expanded to reflect manifestations and complications of the disease by using 4th or 5th characters rather than by using an additional code to identify the manifestation.
- The Diabetes Mellitus codes are combination codes that include the type of diabetes mellitus, the body system affected, and the complications affecting that body system.
- E10.21 reports Type 1 diabetes mellitus with diabetic nephropathy.
- E11.21 reports Type 2 diabetes mellitus with diabetic nephropathy.
- Z79.4 reports long term use of insulin
- ICD10 does not classify 'inadequately controlled, out of control, and poorly controlled' as with 5th digit subclassification in ICD9.

Improvements, cont.

- ▶ The obstetric codes indicate which trimester the patient is in rather than episode of care
- ▶ Codes for postoperative complications have been expanded and a distinction has been made between intraoperative complications and post-procedural disorders
- ▶ A myocardial infarction is considered acute for 4 weeks according to the ICD-10-CM Guidelines for Coding and Reporting. In ICD9, a myocardial infarction is acute for 8 weeks
- ▶ There is no Hypertension Table in ICD-10-CM

SMOKER

Dependence, nicotine F17.200
 with disorder F17.209
 chewing tobacco F17.220
 cigarettes F17.210
 specified product F17.290

Further specificity includes codes for remission and withdrawal within this category.

Signs and Symptoms

R10 Abdominal and pelvic pain

- ▶ R10.0 Acute abdomen
- ▶ R10.1 Pain localized to upper abdomen
- ▶ R10.2 Pain and perineal pain
- ▶ R10.3 Pain localized to other parts of lower abdomen
- ▶ R10.8 Other abdominal pain
 - ▶ R10.81 Abdominal tenderness
 - ▶ R10.82 Rebound abdominal tenderness

Chest pain

R07 Pain in throat and chest

- ▶ R07.0 Pain in throat
- ▶ R07.1 Chest pain on breathing
- ▶ R07.2 Precordial pain
- ▶ R07.8 Other chest pain
 - ▶ R07.81 Pleurodynia
 - ▶ R07.82 Intercostal pain
 - ▶ R07.89 Chest wall pain

Urinary Tract Infection

599.0

ICD-10-CM Codes

Urinary tract infection, site not specified

N39.0 Urinary tract infection, site not specified

**Use additional code (B95-B97) to identify infectious agent

** These are more specific code choice selection available in ICD-10-CM. These include

N30.00 Acute cystitis without hematuria

N30.01 Acute cystitis with hematuria

N30.10 Interstitial cystitis (chronic) without hematuria

N30.11 Interstitial cystitis (chronic) with hematuria

N30.20 Other chronic cystitis without hematuria

N30.21 Other chronic cystitis with hematuria

Urinary Tract Infection (Cont)

599.0

ICD-10-CM Codes

Urinary tract infection, site not specified

N30.30 Trigonitis without hematuria

N30.31 Trigonitis with hematuria

N30.40 Irradiation cystitis without hematuria

N30.41 Irradiation cystitis with hematuria

N30.80 Other cystitis without hematuria

N30.81 Other cystitis with hematuria

N30.90 Cystitis , unspecified without hematuria

N30.91 Cystitis, unspecified with hematuria

N15.9 Renal tubulo-interstitial disease, unspecified

Comparison from Official Guidelines

ICD-9-CM 17. b.1 Acute Fractures vs. Aftercare

- ▶ Traumatic fractures are coded using the acute fracture codes (800-829) while the patient is receiving active treatment for the fracture. Examples of active treatment are: surgical treatment, emergency department encounter, and evaluation and treatment by a new physician.
- ▶ Fractures are coded using the aftercare codes (subcategories V54.0, V54.1, V54.8, or V54.9) for encounters after the patient has completed active treatment of the fracture and is receiving routine care for the fracture during the healing or recovery phase. Examples of fracture aftercare are: cast change or removal, removal of external or internal fixation device, medication adjustment, and follow up visits following fracture treatment.

ICD-10-CM 19.c.1. Initial vs. Subsequent Encounter for Fractures

- ▶ Traumatic fractures are coded using the appropriate 7th character for initial encounter (A, B,) while the patient is receiving active treatment for the fracture. Examples of active treatment are: surgical treatment, emergency department encounter, and evaluation and treatment by a new physician. The appropriate 7th character for initial encounter should also be assigned for a patient who delayed seeking treatment for the fracture or nonunion.
- ▶ Fractures are coded using the appropriate 7th character for subsequent care for encounters after the patient has completed active treatment of the fracture and is receiving routine care for the fracture during the healing or recovery phase. Examples of fracture aftercare are: cast change or removal, removal of external or internal fixation device, medication adjustment, and follow-up visits following fracture treatment.

To provide additional specificity, the fracture extensions are expanded to include the 7th character:

- A**, Initial encounter for closed fracture
- B**, Initial encounter for open fracture
- D**, Subsequent encounter for fracture with routine healing
- G**, Subsequent encounter for fracture with delayed healing
- K**, Subsequent encounter for fracture with nonunion
- P**, Subsequent encounter for fracture with malunion
- S**, Sequelae

- ▶ Some fracture categories provide 7th character extensions to designate the specific type of open fracture. These designations are based on the Gustilo open fracture classification and apply to categories S52 (Fracture of Forearm), S72 (Fracture of Femur), and S82 (Fracture of Lower Leg).

Gustilo Classification: used to identify the severity of the soft tissue damage.

- ▶ B, Initial encounter for open fracture type I or II
- ▶ C, Initial encounter for open fracture type IIIA, IIIB, or IIIC
- ▶ E, Subsequent encounter for open fracture type I or II with routine healing
- ▶ F, Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with routine healing
- ▶ H, Subsequent encounter for open fracture type I or II with delayed healing
- ▶ J, Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with delayed healing
- ▶ M, Subsequent encounter for open fracture type I or II with nonunion
- ▶ N, Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with nonunion
- ▶ Q, Subsequent encounter for open fracture type I or II with malunion
- ▶ R, Subsequent encounter for open fracture type IIIA, IIIB, or IIIC with malunion

Anatomy of Long Bones

- ▶ Diaphysis: The diaphysis also referred to as the shaft. This is the middle section of the long bone, and it is composed of compact bone tissue.
- ▶ Epiphysis: Each long bone has two epiphyses, one located at the proximal end and one at the distal end. Composed of spongy bone that contains bone marrow.
- ▶ Physis: referred to as the growth plate.
- ▶ Periosteum: dense, white fibrous membrane that covers the external surface of the bone.

Example: Fracture coding in ICD-10

- ▶ Larry was seen in the ER for shoulder pain: X-rays indicated there was a fracture of the right clavicle, shaft
- ▶ Code: S42.021A: Displaced fracture of shaft of right clavicle, initial encounter. "A": would be assigned for the initial encounter.
- ▶ Larry returns three months later with complaints of continuing pain and X-rays were taken and indicated a nonunion.
- ▶ Code : S42.021K: Displaced fracture of the shaft of right clavicle, subsequent encounter for fracture with nonunion.
- ▶ Larry returns six months later for a follow up appt.
- ▶ Code: S42.021S: Displaced fracture of the shaft of the right clavicle, sequela.

Laterality

- ▶ Section I.B
- ▶ **13. Laterality**
- ▶ For bilateral sites, the final character of the codes in the ICD-10-CM indicates laterality. An unspecified side code is also provided should the side not be identified in the medical record. If no bilateral code is provided and the condition is bilateral, assign separate codes for both the left and right side.
- ▶ H52.221 Regular astigmatism, right eye
- ▶ H52.222 Regular astigmatism, left eye
- ▶ H52.223 Regular astigmatism, bilateral
- ▶ H52.229 Regular astigmatism, unspecified

Sprains/Strains, Lacerations, Contusions, Poisonings and Adverse effects.

0	Sprains and strains of neck
	The appropriate 7 th character is to be added to each code from category S00 – T88.9
	Initial encounter
	Subsequent encounter
	Sequela
10-CM es	<p>**These codes require a 7th character extender</p> <p>S13.4xx_ Sprain of ligaments of cervical spine S13.8xx_ Sprain of joints and ligaments of other parts of neck S16.1xx_ Strain of muscle, fascia and tendon at neck level</p>

Factors influencing health status and contact with health services

Coding professionals will find the listing of codes for factors influencing health status and contact with health services a bit different in ICD-10-CM than what is currently found in ICD-9-CM. The following blocks represent the ICD-10-CM arrangement:

Z00-Z13	Persons encountering health services for examinations
Z14-Z15	Genetic carrier and generic susceptibility to disease
Z16	Resistance to antimicrobial drugs
Z17	Estrogen receptor status
Z18	Retained foreign body fragment
Z20-Z28	Persons with potential health hazards related to communicable diseases
Z30-Z39	Persons encountering health services in circumstances related to reproduction

Factors influencing health status and contact with health services (Continued)

Z40-Z53	Encounters for other specific health care with potential health
Z55-Z65	Persons with potential health hazards related to socioeconomic and psychosocial circumstances
Z66	Do not resuscitate status
Z67	Body Type
Z68	Body mass index (BMI)
Z69-Z76	Persons encountering health services in other circumstances
Z77-Z99	Persons with potential health hazards related to family and personal history and certain conditions influencing health status

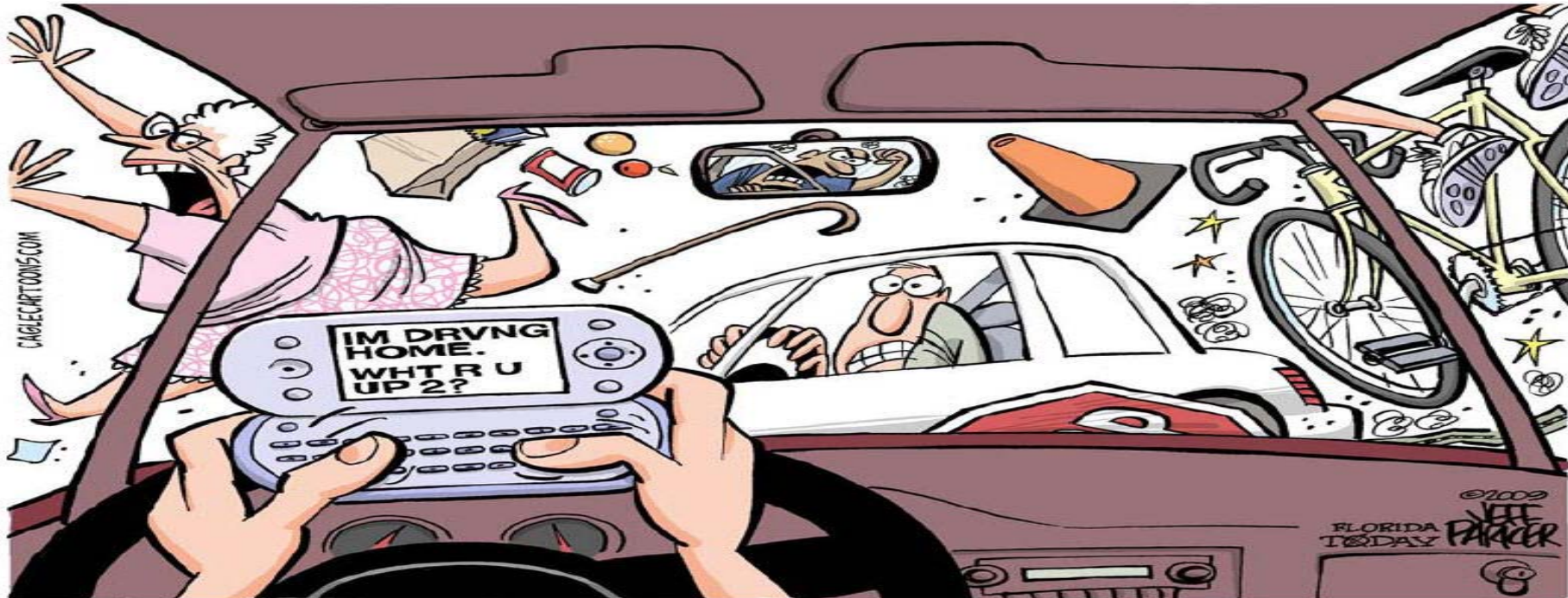
External causes of morbidity (V00-Y99)

- ▶ An external cause code may be used with any code in the range of A00.0-T88.9, Z00-Z99, classification that is a health condition due to an external cause. Though they are most applicable to injuries, they are also valid for use with such things as infections or diseases due to an external source, and other health conditions, such as a heart attack that occurs during strenuous physical activity.
- ▶ This chapter encompasses alpha characters V, W, X, and Y, and contains a massive expansion from ICD-9-CM. It is helpful to review the Tabular to gain an understanding of all of the possible codes available
- ▶ Assign the external cause code, with the appropriate seventh character (initial encounter, subsequent encounter, or sequela) for each encounter for which the injury or condition is being treated.

External causes of morbidity (V00-Y99)

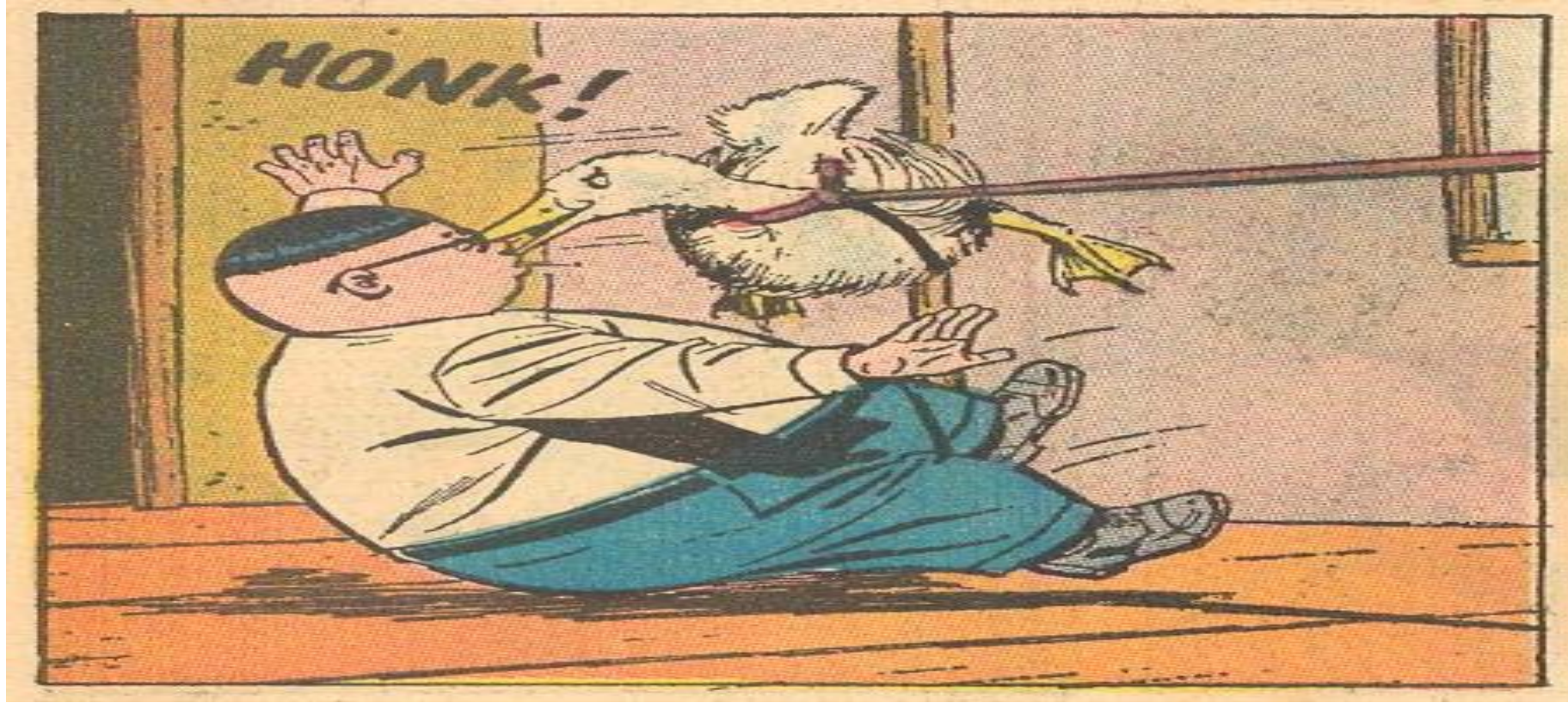
- ▶ The transport accidents section (V00-V99) is structured in 12 groups. Those relating to land transport accidents (V01-V89) reflect the victim's mode of transport and are subdivided to identify the victim's "counterpart" or the type of event. The vehicle of which the injured person is an occupant is identified in the first two characters since it is seen as the most important factor to identify for prevention purposes. A transport accident is one in which the vehicle involved must be moving or running or in use for transport purposes at the time of the accident. The definitions of transport vehicles are provided in the classification and should be reviewed.
- ▶ The following note is available with this section:
 - ▣ Use additional code to identify:
 - ▣ Airbag injury (W222.1)
 - ▣ Type of street or road (Y92.4-)
 - ▣ Use of cellular telephone and other electronic equipment at the time of the transport accident (Y93.C-)

ICD-10 code: Y93.C2



Jeff Parker / Florida Today, courtesy CagleCartoons.com

W61.61XA: Bitten by duck!



Thank You For Attending